

MONGOLIA

1. Per USCINCPACINST 6200.2, Commanders are responsible for an effective Force Health Protection Plan for personnel deploying to locations within the USCP AOR, ensuring implementation of the Plan, for appointing a FHP Officer and assistant who will serve as the Commander's focal point for the planning, coordination, and execution of "real world" force health protection planning for a specific deployment. This is applicable to all assigned and attached personnel, all Department of Defense personnel performing official duties within locations in the AOR, and all US contractor personnel employed directly by the DOD in locations in the AOR.

2. FHP Planning must include the following elements:

a. Health Threat Assessment. This assessment must evaluate known and anticipated health threat/hazards and the appropriate countermeasures to be taken for each.

b. Health Record and Readiness Screening. This task is ongoing and must be validated before deployment.

c. Health Threat Briefing. Must be performed prior to deployment. Attendance must be documented. Minimum contents of a Health Threat Briefing for Mongolia include the following material:

(1) Immunizations.

(a) Personnel must be up to date on all routine immunizations for personnel on deployable status (tetanus booster, hepatitis A, typhoid, influenza).

(b) Meningococcal vaccine is recommended. Year round risk for meningococcal meningitis and meningococcemia Risk is elevated during cooler and drier months (usually November through March). Distribution is countrywide.

(2) Chemoprophylaxis for malaria is not recommended. Malaria is not endemic.

d. Personal Protective Measures.

(1) Safe food and Water.

(a) Drink only sealed bottled or canned water/beverages without ice. Drinking water must be boiled or, alternatively, be adequately treated with iodine or chlorine and be allowed to sit for 30 minutes.

(b) If available, consume only approved food and water. Otherwise, eat piping hot, freshly cooked food from reputable sources. Do not eat salads or fresh fruit/vegetables. An exception is intact fruit which you wash and peel yourself, in order to avoid cross contamination of the peel and fruit.

(c) Wash hands before eating and after using the latrine.

(2) Vector Borne Diseases

(a) Treat uniforms and bed nets with permethrin before departure. Permethrin spray lasts 5-6 washings, or 4-6 weeks, or until dry cleaned. Alternatively, uniforms treated with permethrin concentrate (compressed air sprayer technique) lasts the lifetime of the uniform.

(b). DEET cream. Apply to exposed skin and spread out into a thin layer, being careful to avoid the eyes and mouth. Apply twice a day to minimize risk of malaria, Japanese encephalitis, and dengue fever.

(c) Sleep under a permethrin-treated bed net with the edges tucked in under the bedding all around.

(3) Sexually transmitted diseases. STDs, including gonorrhea, are endemic. Hepatitis B and HIV transmission are reported. Abstinence is the most effective preventive measure. Latex condoms should be used if sexually active, but may not prevent transmission of these diseases, even if used correctly.

(4) Endemic Diseases

(a) Sandfly Fever is regionally endemic. Most sand flies are active between dusk and dawn. Risk is associated with periods of greatest sandfly activity (May through September).

(b) Hemorrhagic Fever with Renal Syndrome. Distribution is countrywide; risk is elevated in rural areas. Risk period is year-round, and is elevated during spring (usually May through June) and late fall (usually November through December), paralleling peaks in rodent populations. Transmission is primarily through aerosol transmission from infective soil contaminated by rodent urine and feces. All confirmed HFRS cases in Mongolia have been attributed to Hantaan virus infection and associated with occupational exposure to field rodents. Preventive measures include: prevent rodent access to houses and other buildings; store human and animal food under rodent-proof conditions; disinfect rodent-contaminated areas by spraying a disinfectant (such as dilute bleach) solution prior to cleaning; do not sweep or vacuum rat-contaminated areas, instead use a wet mop or towels moistened with disinfectant; trap and dispose of rodents using gloves and suitable precautions; in enzootic areas, minimize exposure to wild rodents and their excreta.

(c) Hepatitis A is highly endemic and is transmitted primarily person-to-person via the fecal-oral route. Hepatitis E is endemic and is transmitted primarily via fecally contaminated water. Distribution is countrywide and risk period is year-round.

(5) Environmental Factors.

(a) Environmental health risk factors posing the greatest risk (in descending order) to forces deployed to Mongolia include: urban water and air pollution, inadequate solid waste practices, and scarce water supplies. Other risks include unpredictable severe winter blizzards, high altitude, summer sand and dust storms.

(b) The climate of Mongolia is harsh, characterized by cold winters and extreme summer diurnal temperature variations, with north to south regional differences and severe weather patterns.

(c) Although the climate is not necessarily hot, heat stroke and heat exhaustion may still occur. Necessary precautions include drinking water frequently, on a schedule, to avoid dehydration; adhering to safe work-rest cycles during extreme conditions; and careful observation of teammates to detect warning signs of heat injury such as mental status changes and cessation of sweating.

(6) Hazardous animals. Animal rabies presents a limited risk. Avoid contact with animals. Pre-exposure vaccination should be considered for long term travel to remote areas, where anti-rabies treatment may be unavailable.

(7) Motor Vehicle and General Safety.

(a) One of the greatest risks when traveling overseas is motor vehicle accidents. Seat belts and extreme caution in and around vehicles must be practiced. Urban and rural road conditions/maintenance are poor. There has been a dramatic increase in the number of vehicles on the road, but the knowledge and skills of driving population has not kept pace.

(b) General safety. Exercise caution in all activities to avoid injury of any type. If you are seriously injured,

there may be no option other than medical care in a facility where sterility of equipment and safety of blood products are far below those in the US.

(8) Personal Health and Fitness. Try as much as possible to maintain a healthful regimen of hygiene and fitness. Regular bathing and frequent changes of undergarments, including socks, are important. When exercising outdoors, be aware that shorts and tank tops will make you more susceptible to disease carried by mosquitoes and other insects. Apply DEET repellent to exposed skin prior to exercising outdoors.

3. Assistance with Health Threat assessments, briefings, and countermeasures planning, as well as for the most up to date information, can be obtained from the following sources:

a. Air Force: Pacific Air Force Public Health Officer, Hickam Air Force Base, phone (DSN or 808) 449-2332, x269.

b. Army: Health Promotion and Preventive Medicine Department, Tripler Army Medical Center, phone (DSN or 808) 433-6693.

c. Navy: Epidemiology Department, Navy Environmental and Preventive Medicine Unit 6, phone (DSN or 808) 473-0555.

d. Up to date State advisory and Consular Information Sheet can be obtained at <http://travel.state.gov>.